



**HAWAII STATE ETHICS COMMISSION**  
 1001 BISHOP STREET, ASB TOWER 970  
 P.O. BOX 816, HONOLULU, HAWAII 96809  
 TEL: 587-0460 FAX: 587-0470  
 email: ethics@hawaiiethics.org

THIS SPACE FOR OFFICE USE ONLY

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 STATE OF HAWAII  
 STATE ETHICS COMMISSION
**LOBBYIST REGISTRATION FORM**

(Type or Print Clearly)

<b>PART I LOBBYIST</b>			
NAME(Last)	(First)	(Middle)	TELEPHONE
STONE	JAMES	JEROME	(808) 521-4566
MAILING ADDRESS (Street)			FAX
841 BISHOP STREET, SUITE 1711			(808) 521-4252
(City)	(State)	(Zip Code)	
HONOLULU	HAWAII	96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
LAW OFFICES OF JAMES J. STONE			(808) 521-4566
MAILING ADDRESS (Street)			FAX
841 BISHOP STREET, SUITE 1711			(808) 521-4252
(City)	(State)	(Zip Code)	
HONOLULU	HAWAII	96813	

<b>PART II ORGANIZATION</b>			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
ISLAND INSURANCE COMPANY, LTD.			(808) 564-8160
MAILING ADDRESS (Street)			FAX
1022 BETHEL STREET			(808) 275-8160
(City)	(State)	(Zip Code)	
HONOLULU	HAWAII	96813	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
JOHN F. SCHAPPERLE			(808) 564-8160
MAILING ADDRESS (Street)			FAX
1022 BETHEL STREET			(808) 275-8160
(City)	(State)	(Zip Code)	
HONOLULU	HAWAII	96813	

**PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY**

- |  |   |   |   |
|--|---|---|---|
| <input type="checkbox"/> Agriculture                               | <input type="checkbox"/> Education                                  | <input type="checkbox"/> Human Services                                     | <input type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities         | <input checked="" type="checkbox"/> Government Operations & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation                       |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs                           | <input type="checkbox"/> Labor & Employment                                 | <input type="checkbox"/> Transportation                             |
| <input type="checkbox"/> Culture, Arts, Historic Preservation      | <input type="checkbox"/> Health                                     | <input type="checkbox"/> Planning, Land & Water Use Management              | <input type="checkbox"/> Other: (Indicate below)                    |
| <input type="checkbox"/> Ecology, Energy Environmental Protection  | <input type="checkbox"/> Housing                                    | <input type="checkbox"/> Public Safety & Corrections                        |   |

**PART IV CERTIFICATION OF LOBBYIST**

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

(Signature of Lobbyist)

(Date)

**PART V AUTHORIZATION TO LOBBY**

NAME

TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED

JOHN F. SCHAPPERLE

PRESIDENT

NAME OF ORGANIZATION (if applicable)

TELEPHONE

ISLAND INSURANCE COMPANY, LTD.

(808) 564-8160

MAILING ADDRESS (Street)

FAX

1022 BETHEL STREET

(808) 275-8160

(City)

(State)

(Zip Code)

HONOLULU

HAWAII

96813

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.

(Signature of Authorizing Officer or Person Represented)

(Date)